

DISCLOSURE SUMMARY PAGE

2010 OCT 19 PM 3:01

lowa Ethics and Campaign Disclosure Board 510 E. 12", Ste. 1A Des Moines, Icwe 50319 Fax: 515-281-4073

File with:

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statisments and reports for State PACs and State Perties must be filed electronically.

Reset Form COMMITTEE NAME (Must be same as on Statement of Organization) FRIENDS OF BRYAN TINGLE FORM DR-2 IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (DISCLOSURE (Rev. 12/2009) REPORT For Office Use Orlly 11) Local Ballot issue Comm. # CANDIDATE COMMITTEES ONLY: Logged in Candidate Name Political Party (If applicable) **BRYAN J. TINGLE** Democat Computer Office Sought COUNTY ATTORNEY District (if Senate or House) Audited Late reports are subject to possible civil and criminal panalties. Pursuant to lowe Code sections 688.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. (515) をおアー みとろじ 10-17-10 SIGNATURE OF PERSON FILING REPORT TELEPHONE AM FILING A 10-19-2010 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. (raport data) Indicate by # 1 ☐CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held WARREN STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 586.51 ADD TOTAL MONEY TAKEN IN THIS PERIOD 525.00 Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F)..... 6,000,00 0.00 Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule Happlies to Candidates' Committees Only) 7,111,51 SUB-TOTAL \$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD 6,149.59 Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)........... Schedule F: Loan Repayments total (Attach Schedule F)..... 0.00 961.92 CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ **UNPAID BILLS (From Schedule D - Attach Schedule D)......\$ 10,068.25 *IN KIND CONTRIBUTIONS (From Schedule E - Atlach Schedule E)......\$ 558,95 17,500.00 CONSULTANT BREAKDOWN (Schedule G Attached?) **√** YES CANDIDATE COMMITTEES ONLY: 0.00 VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For instructions, See Back of Form

CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	(Rov. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) FRIENDS OF BRYAN TINGLE		CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NEXTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

GAUTION; Section 685.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
09/30/10	ID# CK#	William L. Dawe, III & Sheila K. Tipton 13074 Lincoln Avenue Clive, IA 50325		\$50	Incom
09/30/10	CK#	Lorraine & Thomas May 331 - 28th St. DSM, IA 50312		50	
09/30/10	CK#	Hugh Cain & Anne Clark 5290 33rd Ave Norwelk, IA 50211		50	
10/2/10	ID# CK#	Robert & Kathy Williams 1304 Wesley Lane Indianola, IA 50125		250	
10/3/10	ID#	Ted Diehl 16650 Kennedy St. Indianola, IA 50125		100	
10/4/10	CK#	Tina M. Bick 4717 Brookview Dr. WDM, IA 50265		25	
	ID# CK#				
ı	ID# CK#				
	CK#				
	ID# CK#				
			SUB-TOTAL	\$ 525.00	

* Disclosure law requires condidate committees to disclose the relationship of any relative making a contribution to the *Disclosure law requires continuous commisses to descree the relationality object relatives making a continuous to the bird degree of conganguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

SCHEDULE

Rosetl	ore

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF
AME	NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization).

PRIENDS OF BRYAN TINGLE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/1/10	ID# CK#	Carter Printing 1739 E. Grand DSM, IA 50316	Printing Costs - Yard Signs & Cards	\$ 1434.71
0/7/10	ID# CK#	USPS Carlisle IA 50047	Postage	2167.04
9/15/10	ID# CK#	William Fultz & Associates 7620 115th Ave Indianola, IA 50125	Design for Billboards and Signs	270.00
0/22/10	ID#	Carter Printing 1739 E. Grand DSM, IA 50316	Printing Costs -Absentee Ballot Mailings	866.32
/22/10	ID#	USPS Carlisle IA 50047	Postage	631.52
/29/10	ID# CK#	USPS Carlisle IA 50047	Postage	264.00
0/13/10	ID# CK#	USPS Carlisle IA 50047	Postage	132.00
0/14/10	ID# CK#	Ashley Radeliff 418 Sixth Ave. DSM, IA 50309	Reimbursed expenses - Postage and Mailing Supplies	. 384.00
			SUB-TOTAL	\$ 6,149.59
			TOTAL (If last page of this schedule)	\$ 6,149.59

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/emities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A 402(3)(i).)

Page	I	of ¹	

NOTE: Del	EE NAME (Must be same as on Statement of Organization) Of Bryan Tingle outs previously reported that remain unpeld fraust be included on an acodule, as well as any new obligations incurred in this period.	te Berry	(Rev. 08/96) INCURRED INDEBTEDNE CHECK THIS BO IF AMENDING
DEBTS/C (DO NOT	OSLIGATIONS REMAINING THIS REPORTING PER INCLUDE LOANS - SHOW LOANS ON SCHEDUL	Abst Form	An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an incurred
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS SERVICES PROVIDED O PURCHASED	OR BALANCE OWED A CLOSE OF REPORTING
5/14/2010	Bryan J. Tingle, 4437 170th Ave., Carlisle IA 50047	Advertising Costs	\$ 59.50
5/13/2010	Bryan J. Tingle, 4437 170th Ave., Carlisle IA 50047	Membership Fee to Democrate Party Voter Activation Netwo (VAN)	tic ork 250.00
4/15/2010	Bryan J. Tingle, 4437 170th Avc., Carlisle IA 50047	USPS: PU Box Rental	28,00
8/19/2006	Bryan J. Tingle, 4437 170th Ave., Carlisle IA 50047	Magnets and Bags	870.83
/14/2006	Bryan J. Tingle, 4437 170th Ave., Carlisle IA 50047	Yard Signs	1,394.12
30/2006	Bryan J. Tingle, 4437 170th Avc., Cartisle IA 50047	Advertising	1,068.00
0/29/2006	Bryan J. Tingle, 4437 170th Ave., Carliele IA 50047	Advertising	1,232.00
	TOTAL DEBTS OWED BY COMMITTEE AT TH	SUB-TOT HE END OF THIS REPORTING PERK	4.902.45

ANDIDATE COMMITTEES NOTE:
Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future is continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, politing, managing, or ganking services. Report on Schedule G the nature of performance and the estimated performance reasonably experied of the consultant.

(for Schedule D)

COMMITTEE NAME (Must be same as on Statement of Organization) FRIENDS OF BRYAN TINGLE	(Rev.
MOTE: CAMP	

Dabls praviously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

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T. Edward VI

SCHEDULE D (Rev. 08/98)	INCURRED
	CK THIS BOX MENDING M

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice

DATE		has bea	en received.
INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
8/7/10	Bryan J. Tingle 4437 170th Ave Carlisle, IA 50047	Advertising Costs - Billboards	2,900.00
8/13/10	Bryan J. Tingle 4437 170th Ave Carlisle, IA 50047	USPS - Bulk Mail Permit Costs	370.00
8/23/10	Biyan J. Tingle 4437 170th Ave Carlisle, IA 50047	Magnets for Football Schedule Mailing	480.15
9/1/10	Bryan J. Tingle 4437 170th Ave Carlisle, IA 50047	Carter Printing - Printing Costs Football Schedule Mailing	1,415.65
-			
	TOTAL DEGREE ON COMMENT	SUB-TOTAL	5,165.80
	10 IVE DER 12 OMED BA COMMILLEE Y.	T THE END OF THIS REPORTING PERIOD	10,068.25
If actual figure is	unknown, show "estimated" beside the figure.	Page	2 of 2

of_2 (for Schedule D)

CANDIDATE COMMITTEES NOTE:

CARDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schodulo G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS	SEE BACK OF	FORM
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COMMITTEE NAME (Must be same as on Statement of Organization) FRIENDS OF BRYAN TINGLE	SCHEDULE E (Rev. 06/97)	IN-KIND
	CHECK AMEND	THIS BOX IF ING FORM

DATE RECEIVED (MWDD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER
7/19/10	Bryan J. Tingle 4437 170th Ave Carlisle, IA 50047		Fax Costs	\$ 4.34	CONTRIBUTION
8/24/10	Bryan J. Tingle 4437 170th Ave Carlisle, IA 50047		Helium for Balloons	96.71	
9/2/10	Bryan J. Tingle 4437 170th Avc Cartisle, IA 50047		Advertising @ Golf Outing	60.00	
9/4/10	Beverly Lightner 6103 SW 14th St. Des Moines, IA 50315	Mother - in- Law	Paint for Signs	142.46	
9/23/10	Bryan J. Tingle 4437 170th Ave Carlisle, IA 50047		Parade Candy	255.44	
		·			
		· · · · · · · · · · · · · · · · · · ·	SUB-TOTAL	\$ 558.95	· · · · · · · · · · · · · · · · · · ·
			TOTAL (If last page of this schedule)	5 558.95	•

"Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)

MMHTTEE NAM IENDS OF E	RYAN TINGLE		(Rev. 02/08) RECEIV
E: This sched	ule reports maney loaned to the committee which is deposited in	the constriktee account.	CHECK THIS BOY
'AL UNPAID LO	DANS FROM LAST REPORTING PERIOD \$ 11,500.00		AMENDING FORM
(Original)	RY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD source of loan, such as a bank, must be shown if a third party is	involved. Include loans from cand	tidate's personal funds.)
DATE	NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	
RECEIVED (MM/DD/YR)	(include Endorser's Name, If Applicable)	CANDIDATE (If Applicable	AMOUNT OF LOAN
9/1/10	Bryan J. Tingle		\$ 0.000.00
0, 1, 10	4437 170th Ave. Carlisle, IA 50047		6,000.00
	Canisie, IA 50047		
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PY (1 MGN/SW		TOTAL (PART I)	s 6000.00
troub it	ARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD Orgiven must be reported on Schedule E In-land Contributions.	, ,	s 6000.00
DATE PAID	ARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD Ingiven must be reported on Schedule E - In-land Contributions, NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO	AMOI INT BERAID
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DATE PAID	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Audiloable	AMOUNT REPAID
DATE PAID	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable) TOTAL CASH	RELATIONSHIP TO CANDIDATE* (If Applicable	AMOUNT REPAID
DATE PAID	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable	AMOUNT REPAID
DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable) TOTAL CASH From Schedule E — TUT. TOTAL OUTSTANDING LOANS E	RELATIONSHIP TO CANDIDATE* (If AUDICADIO REPAYMENTS (PART II) AL LOANS FORGIVEN NO OF REPORT PERIOD	AMOUNT REPAID \$
DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable) TOTAL CASH	RELATIONSHIP TO CANDIDATE" (If Applicable CANDIDATE") (If Applicable CANDIDATE CANDIDA	AMOUNT REPAID \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

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COMMITTEE	NAME(Must be same as on Statement of	Osmonization)		G	BREAKDOWN
I.	ds of Bryan Ting	•		(Rev. 02/08)	OF MONETARY EXPENDITURES BY CONSULTAN
PARTI-NAME	AND ADDRESS OF CONSULTANT			CHECK AMENDI	THIS BOX IF NG FORM
Name of Cons	sultant Fultz & Associates, Inc.				
Mulling Addre	th Avenue	······································			
City	State State	Zip Code	>		·
		TOTAL ANTIQUE ATTO O			
From 5/17/10		IVIAL ANTICIPATED C	OMPENSATION FOR PERFOR	MANCE	
To11/5/10		5000.00		_	
ESTIMATES OF	PERFORMANCE			***************************************	
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ART II- (TEMIZE	D BREAKDOWN OF UNREIMBURSED I	EXPENSES PAID BY CO	MRIS TANT TO OTHERS HAD		
ART II- ITEMIZE ONTRACT (Thee DATE EXPENDED	D BREAKDOWN OF UNREIMBURSED I		NSULTANT TO OTHERS IN P	ERFORMING SEI	RVICES OF
DAIE	D BREAKDOWN OF UNREIMBURSED P o expensor should NOT be reported or NAME AND ADDRESS TO WHOM (Olsbursement) WAS I	EXPENDITURE	NSULTANT TO OTHERS IN P to direct payment from the co	ERFORMING SEI INSUITANT.) AMOUNT EXFENDE	r
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EXPENDED	NAME AND ADDRESS TO WHOM	EXPENDITURE	PURPOSE	AMOUNT EXPENDE	r
EXPENDED	NAME AND ADDRESS TO WHOM	EXPENDITURE	PURPOSE SUB-TOTAL	AMOUNT EXPENDE	r
EXPENDED	NAME AND ADDRESS TO WHOM	EXPENDITURE	PURPOSE SUB-TOTAL	AMOUNT EXPENDE	r